

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000062563

Entity Name: 4 SEASONS GOLF RESORT LLC

Current Principal Place of Business:

535 JULIE LANE
WINTER SPRINGS, FL 32708

Current Mailing Address:

535 JULIE LANE
WINTER SPRINGS, FL 32708

FEI Number: 46-5637261

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOODA, NASH
535 JULIE LANE
WINTER SPRINGS, FL 32708 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name HOODA, NAUSHIK
Address 535 JULIE LANE
City-State-Zip: WINTER SPRINGS FL 32708

Title MANAGER
Name HOODA, NEELA
Address 535 JULIE LANE
City-State-Zip: WINTER SPRINGS FL 32708

Title MANAGER
Name HOODA, ROHAN
Address 535 JULIE LANE
City-State-Zip: WINTER SPRINGS FL 32708

Title MANAGER
Name HOODA, MISHA
Address 535 JULIE LANE
City-State-Zip: WINTER SPRINGS FL 32708

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROHAN HOODA

MANAGER

05/12/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date